Unclaimed Property Inquiry

Issued under authority of P.A. 29 of 1995. Filing is voluntary.

Complete this inquiry form including your notarized signature. You may be required to complete and sign a formal claim form and provide additional documentation.

Name as it Appears on Unclaimed Property Web Search	Owner's Social Security Number or Federal ID Number
Claimant Name/Relationship (if Property Owner is deceased)	Claimant's Social Security Number or Federal ID Number (if different)
Current Address (Number and Street or RR#)	Property Identification Number
City, State, ZIP Code	Daytime Telephone Number
FORMER ADDRESSES. List the former addresses in Mic	higan used by the property owner.
Street Address	City, State, ZIP Code
CLAIMANT CERTIFICATION	
	rovided on this inquiry form is true to the best of my knowledge. nnify and hold harmless the State of Michigan, officers and nd resulting in payment of the property being claimed.
SUBSCRIBED AND SWORN TO BEFORE ME THIS	SIGNATURES OF CLAIMANTS
, DAY OF, 20	
	- <u></u>
NOTARY PUBLIC COUNTY, STATE	- <u></u>
MY COMMISSION EXPIRES	
Office Use Only:	Return completed inquiry form along with a copy of a picture I.D. and copy of your Social Security card to:
Approval: 1 2 3 4 5	Unclaimed Property Division
Vicit	Michigan Department of Treasury
Visit www.michigan.gov/unclaimedproperty	P.O. Box 30756
	Lansing MI 48909